Application or Docket Number

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

490962002200

CLAIMS AS FILED - PART (Column 1)					(Column 2)		-	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			28				ı	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR.	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			78 minus 20=		• 58			X\$ 9=	<u> </u>	OR	X\$18=	1044
INDEPENDENT CLAIMS			9 minus 3 =		6			X42=		OR	X84=.	50 F
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "C						olumn 2	L	TOTAL		OR	TOTAL	2298
CLAIMS AS AMENDED - PART II							OTHER THAN . SMALL ENTITY OR SMALL ENTITY			THAN		
-		(Column 1)		(Colur		(Column 3)	1	SINACE		í · · · ·	CIIIALE I	ADDI-
ENTA		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	· (a)	Minus	-786	建	- 73		X\$ 9=		OR		1494
AME	Independent	. 18	Minus	***	9	=9	Ħ	X42=		OR	A C	774
لــا	FIRST PRESE	NTATION OF M	JETIPLE DE	PENUEN	CLAIM] [+140=		OR	+280=	
							. 1	TOTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)											ADDIT. I EE	
		CLAIMS		HIGH	IEST	Columno	7 1		ADDI-	i :		ADDI-
AMENDMENT B		REMAINING APTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT	+	RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**	· Oit	= .	11	X\$ 9=	1 6.6.	OR	X\$18=	1:
MEN	Independent	*	Minus	***		=	11	X42=		OR	X84=	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛		,	On		
		,						+140=		OR	+280=	<u></u>
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		2]	X42=			X84=	
5	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			OR		
A Make policy is polyused disclosed they also also polyuse Q weite "O" in polyuse Q								+140=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	TOTAL ADDIT. FEE	
		mber Previously Pa						ınd in the ap	propriate bo	x in co	olumn 1.	